

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Women Vote!		FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mundy Katowitz Media		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 1322 G St SE		Amount 391424.09	
City Washington	State DC	Zip Code 20003-3021	Transaction ID : VN7A7A0YED5
Purpose of Expenditure Media Buy TV	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 03 / 09 / 2016	
Name of Federal Candidate DONNA EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MD	
Calendar Year-To-Date Per Election for Office Sought 1434954.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Mundy Katowitz Media		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 1322 G St SE		Amount 560222.27	
City Washington	State DC	Zip Code 20003-3021	Transaction ID : VN7A7A0YEE3
Purpose of Expenditure Media Buy TV and Radio	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 03 / 09 / 2016	
Name of Federal Candidate DONNA EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MD	
Calendar Year-To-Date Per Election for Office Sought 1434954.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	951646.36
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Date

MM / DD / YYYY
03 / 15 / 2016

Signature